

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	RH		11/23/01
FORMALITY REVIEW	TR	1112	11/15/02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	04 12 02 03
30	02 26 12
31	02 03 03
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Claim	Date
Final	
Original	04 10 02 03
30	02 26 12
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Claim	Date
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If more than 150 claims or 10 actions  
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SSZ  
11/16/02

capm hr 2